

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

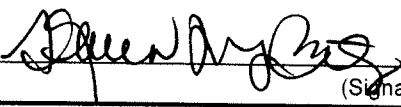
LOBBYIST REGISTRATION FORM

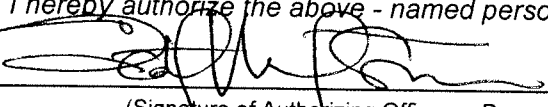
(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) PILTZ (PILTZ)		(First) Karen	(Middle) 	TELEPHONE 808-528-8200
MAILING ADDRESS (Street) 745 Fort Street, 9th Floor			FAX 808-536-5869	
(City) Honolulu		(State) HI	(Zip Code) 96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) Chun Kerr Dodd Beaman & Wong			TELEPHONE 808-528-8200	
MAILING ADDRESS (Street) 745 Fort Street, 9th Floor			FAX 808-536-5869	
(City) Kahului		(State) HI	(Zip Code) 96733	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Maui Ethanol			TELEPHONE 808-927-0619
MAILING ADDRESS (Street) P.O. Box 330100			FAX
(City) Kahului		(State) HI	(Zip Code) 96733
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Scott Matsuura			TELEPHONE 808-927-0619
MAILING ADDRESS (Street) P.O. Box 330100			FAX
(City) Kahului		(State) HI	(Zip Code) 96733

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input checked="" type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operation & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input checked="" type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
 (Signature of Lobbyist)	1/29/2007 (Date)

PART V AUTHORIZATION TO LOBBY		
NAME Scott Matsuura		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice President
NAME OF ORGANIZATION (if applicable) Maui Ethanol		TELEPHONE 808-927-0619
MAILING ADDRESS (Street) P.O. Box 330100		FAX
(City) Kahului	(State) HI	(Zip Code) 96733
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.		
 (Signature of Authorizing Officer or Person Represented)		1/29/2007 (Date)